

Annual Meeting of National ECDC Correspondents in Western Balkans and Turkey

13 October 2021, online WEBEX event

1. Background

ECDC under the coordination of the National ECDC Correspondents has been working with the national authorities in the EU enlargement countries (Albania, Bosnia and Herzegovina, Kosovo¹, Montenegro, Serbia, North Macedonia, and Turkey) to support and strengthen their capacities to participate in ECDC activities. In the framework of ECDC technical cooperation activities supported by the European Commission under the consecutive projects financed from the Instrument of Pre-accession Assistance (IPA), representatives from the countries participate as observers in ECDC activities, meetings, networks, and technical discussions related to epidemic intelligence and communicable disease surveillance and control.

One of the five strategic objectives of the [ECDC Strategy 2021-2027](#) is dedicated to increasing health security in the EU through international collaboration and alignment regarding infectious disease policies and practice by strengthened cooperation and coordination between ECDC and partners in non-EU countries, in particular strengthening collaboration with the EU enlargement countries, while ensuring a coordinated approach with WHO/Europe for avoiding duplication. The cooperative activities with Western Balkans and Turkey are currently implemented through:

- ✓ Implementation of ECDC Action funded by the European Commission (DG NEAR) under IPA (Instrument of Pre-accession Assistance) on "[Preparatory measures for the participation of the Western Balkans and Turkey in the European Centre for Disease Prevention and Control with special focus on One-Health against AMR and enhanced SARI surveillance, 2020 – 2024](#)" (ECDC-IPA6 project).
- ✓ Whole Genome Sequencing service support to Western Balkans.
- ✓ Mediterranean and Black Sea Programme for Interventions Epidemiology Training (MediPIET) part of the [EU Initiative on Health Security](#) under ENI (European Neighbourhood Instrument).

The cooperation with Western Balkans and Turkey is reviewed, defined, and planned by ECDC through the network of officially nominated National ECDC Correspondents, especially during discussions in annual meetings. During the last meeting of National ECDC Correspondents that was held on 30 September 2020, ECDC presented in details the technical cooperation activities with Western Balkans and Turkey and discussed strategic developments at ECDC, support to COVID-19 responses, achievements over the previous couple of years, and reflected of future cooperation priorities.

Following up on the discussions in 2020 and reflections on recent developments at ECDC and in the countries in response to the COVID-19 pandemic, this annual meeting of National ECDC Correspondents and Observer NFPs focused on the technical cooperation developments over the last year and key priorities for future ECDC support to national authorities in Western Balkans and Turkey.

The meeting agenda (see Annex 1) was designed to meet the following specific meeting objectives:

¹ This designation is without prejudice to positions on status, and is in line with UNSCR 1244/1999 and the ICJ Opinion on the Kosovo declaration of independence

- To update National ECDC Correspondents on recent strategic developments related to strengthening the EU's health security framework and the legislative proposal to extend the mandate of ECDC.
- To reflect on achievements, lessons learned, and next steps in the specific areas of cooperation, implemented through the ECDC-IPA6 project, MediPIET, HERA Incubator initiative.
- To discuss the implementation of ECDC strategic roadmap 2021-2027 in relations to the cooperation with EU candidate and potential candidate countries, in particular through the current cooperation instrument and reflect on the future needs to deepen cooperation between ECDC and national authorities in Western Balkans and Turkey.

In addition to the National ECDC Correspondents, the meeting was attended by Observers National Focal Points for Microbiology for Surveillance, for Threat Detection, and for Preparedness and Response from Western Balkans and Turkey. European Commission officials from DG SANTE and DG NEAR were also part of the discussion.

2. Discussion

2.1 Strategic developments; Legislative proposals for a European Health Union: Strengthening the EU's health security framework and extending the mandate of ECDC and its international role

ECDC collaboration with the Western Balkans and Turkey have been further intensified over the last years and particularly during the ongoing COVID-19 pandemic. The European Commission has provided additional financial support to advance this close cooperation and assist the countries in actions to respond to the crisis. The EU commitment has been confirmed during the EU-Western Balkans Summit in October 2021.

In November 2020, the European Commission presented a set of legislative proposals as first steps to forming a European Health Union. The objective of the initiative is to strengthen the EU's health security framework and to reinforce the crisis preparedness and response role of key EU agencies.

The legislative proposals put forth on 11 November 2020 are as follow:

- Proposal for a Regulation on serious cross-border threats to health and repealing Decision No 1082/2013/EU
- Proposal amending the ECDC mandate
- Proposal amending the European Medicines Agency's (EMA) mandate

An additional legislative proposal was also announced on 15 June 2021 creating a new Health Emergency preparedness and Response Authority (HERA) for strengthening preparedness and response by enabling rapid availability, access and distribution of needed countermeasures.

The proposals are currently being negotiated between the European Parliament, the Council and the Commission.

With regards to the proposal to amend ECDC's mandate, the aim is to strengthen ECDC and make it more operational. The key areas of the proposed changes to ECDC's mandate are:

- Improving situational awareness: rapid digitalisation of integrated surveillance systems.
- Better preparedness in Member States: develop prevention and response plans against future epidemics and capacities for integrated rapid epidemic and outbreak response.
- Provision of non-binding recommendations for risk management.
- Expanded capacity to mobilise and deploy the EU Health Task Force to assist the response in Member States and third countries (candidate and potential candidate countries, ENP and EU partner countries).
- Building up the key competences for health protection – the Centre will be tasked with coordinating a new network of Union reference laboratories for public health and a new network of national services supporting transfusion transplantation and medically assisted reproduction.
- Reinforcing the Centre's contribution to the EU's international cooperation and development and EU commitment to global health security preparedness.

These changes also align with the [ECDC Strategy for 2021-2027](#). Strategic objective number 4 aims to increase health security in the EU through strengthened cooperation between ECDC partners in non-EU countries. Action area 4.1 in the strategy focuses specifically on increased cooperation with Western Balkans and Turkey and ENP partner countries.

ECDC intends to engage Western Balkans and Turkey in ECDC systems and networks according to the individual country's level of readiness, as well as EU policy priorities.

As part of the implementation roadmap, ECDC aims to:

- Work towards a gradual integration of Western Balkans and Turkey into ECDC activities by supporting:
 - o Strengthened surveillance; preparedness and response; public health microbiology capacities
 - o Strengthened workforce-oriented capacity, delivered through MediPIET

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- An improved One Health approach against AMR
- In response to the Covid-19 pandemic:
 - Enhanced SARI surveillance to support the implementation of fit-for-purpose surveillance systems

Additionally, by 2027 or earlier, ECDC aims that countries in the Western Balkan region and Turkey will be able to report on all notifiable diseases at EU level based on EU acquis. While this is challenging, it is an obligation under EU legislation, and ECDC is committed to support countries in this work.

This work will mainly be funded by the ECDC-IPA6 project (2020-2024) and the EU Initiative on Health Security (2020-2025) that provides funding for the MediPIET programme.

In addition, under the HERA Incubator (The European Health Emergency Preparedness and Response Authority), ECDC extends the Whole Genome Sequencing (WGS) service to Western Balkans and Turkey to support the detection of SARS-CoV-2 VOC.

2.2 ECDC-IPA6 project: overview of implementation, key achievements, and future plans

2.2.1 Work Stream 1 – Preparatory measures for participation in ECDC

State-of-play and future outlook

Since the last meeting of National ECDC Correspondents on 30 September 2020:

- The ECDC-IPA6 project has been extended until 2024
- An additional workstream has been added to the ECDC-IPA6 project (Work stream 3 on enhancing SARI surveillance in Western Balkans)
- The budget for ECDC-IPA6 project has been increased from 1m EUR to 2.5m EUR
- Experts from Western Balkans have been integrated into ECDC National Focal Points for Respiratory Virial Diseases and its associated networks on influenza and covid (NFP RVD and EISN&ECOVID-Net) as observers
- Discussions on how to facilitate the management of ECDC contacts has been initiated
- Monthly coordination meetings with National ECDC Correspondents on COVID-19 response support have continued
- EPIS platforms (EPIS-ELDSNet and EPIS-FWD) have been migrated to EpiPulse; access to additional domains for specific roles in Western Balkans have been granted

The **ECDC-IPA6 project 2020-2024** continues and now consists of three work streams:

- **Work Stream 1. Preparatory measures for the participation of the Western Balkans and Turkey in ECDC (systems, networks, activities).**
Objective: to support national authorities to implement EU acquis on serious cross-border threats to health and in particular by strengthening surveillance, preparedness, and microbiology laboratory system capacities supporting public health
 - Current roles established in Western Balkans and Turkey for interactions with ECDC on technical collaboration:
 - National ECDC Correspondent
 - Observer NFP Microbiology
 - Observer NFP Surveillance
 - Observer NFP Preparedness and Response
 - Observer NFP Threat Detection
 - Nominated experts for:
 - Reporting to TESSy national/subnational surveillance data on WNF, HEPA, GONO, HAI-HALT, HAI-PPS
 - EPIS/EpiPulse FWD
 - EPIS/EpiPulse ELDSNet

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- NEW: Observer NFP Respiratory Viral Diseases and CPO for EISN & ECOVID-Net to report COVID-19 and Influenza surveillance data to TESSy under ECDC cooperation
- ECDC enables other designated national experts to attend routine ECDC meetings and capacity building events
- Activities currently on-hold or postponed:
 - ENLabCap
 - Advancing countries' reporting of mutually agreed diseases to TESSy and gradually expanding the list as per country needs and public health objectives;
 - Configuration of ECDC web-based dashboards and country feedback;
 - Trainings on new features and functionalities, data reporting requirements and ECDC minimum standards, as relevant;
 - Euro-GASP
 - Training activities on PHEP, simulation exercises, etc.
 - Some of the ECDC annual disease network meetings
- Activities implemented in 2020-2021:
 - Observers NFP RVD and EISN & ECOVID-Net from WB (ToR, nomination of contacts, access to TESSy, invitation to meetings);
 - Migration from EPIS to EpiPulse, signature of data protection agreements (except Turkey)
 - EQAs: SARS-COV-2, AST in food-borne pathogens, EQA on LD
- Meetings conducted in 2021:
 - 9 regular Joint webinars of NFP for Preparedness and NFP for Threat Detection
 - TB Network meeting, 24-25 February 2021
 - Virtual Workshop on antimicrobial resistance for FWD-Net, 19-20 April 2021
 - Annual meeting of the European Emerging and Vector-borne Diseases (EVD) Network, 19-20 May 2021
 - ELDSNet Business Meeting, 9 June 2021
 - Annual Influenza and COVID-19 Surveillance Meeting, 7-8 October 2021
- Planned activities for 2021 and 2022:
 - Further engagement of experts from WB and TR to EpiPulse – subject to signature of data protection agreements by competent institution
 - Integration as Observers into ECDC EVD NFP structure and networks (described in more details below)
 - Integration of WB country contacts management in SRM – National ECDC Correspondents (more details below)
 - Resuming TESSy user country support, data analysis for country feedback to strengthen surveillance and data reporting – recruitment of Project Scientific Officer Surveillance as of January 2022
 - Resuming discussions on ENLabCap aligned with revamped EULabCap tool for EU/EEA
 - Engagement of WB in relevant microbiology support services, including EQAs and Euro-GASP
- Planned meetings for 2021 and 2022:
 - Regular Joint NFP Preparedness and NFP Threat Detection webinars, monthly
 - Annual ELDSNet Meeting, 18-19 October 2021
 - Joint Meeting of NFP for Surveillance and NFP for Microbiology, 21-22 October 2021, tbc 2022
 - Competency-based training workshop in preparedness for managing public health emergencies, tbc 2022
 - Annual disease network meetings organised by ECDC (such as TB, Flu, EVD, FWD, HAI, COVID-19, ELDSNet, STI, Hepatitis B&C)
 - Possible support on EURGen-RefLabCap project and on FWD AMR – ReflabCap project (HADEA-funded) to countries that are not part of EU Health Programme (Albania, Kosovo*, Montenegro, North Macedonia, Turkey) – in coordination with support from WHO/Europe
 - Multi-country simulation exercises, In-Action and After-Action Reviews, as relevant in 2022
 - ECDC Training-of-trainers (ToT) workshop on Legionella and its prevention for hoteliers, F2F, 8-10 March 2022

- Events aimed at strengthening national and/or regional capacities and capabilities in complementarity with MediPIET, 14 designated experts, 2 per country:
 - Winter Workshop 2021, December 2021 (virtual)
 - Summer School 2022, end-May – June 2022: planned to be in-person
 - Winter Workshop 2022, November 2022: planned to be in-person
- **Work Stream 2. Advancement of One-Health responses against AMR (ECDC/EFSA)**
Objective: to conduct gap analysis and enable implementation of country roadmaps on One-Health against AMR, as well as to support the development of an electronic surveillance of AMR
- **Work Stream 3 with the emphasis on enhancing SARI surveillance**
Objective: to support the implementation of fit-for-purpose surveillance systems in Western Balkans and engage on vaccine effectiveness studies

An update on the status of Work Stream 2 and Work Stream 3 is provided further in the subsequent chapters of this Report.

EpiPulse and engagement of Western Balkans and Turkey

EpiPulse is the new surveillance platform for infectious disease at ECDC. It replaces The European Surveillance System (TESSy) and Molecular typing, The Epidemic Intelligence Information System (EPIS), as well as the ECDC Threat tacking tool. Important to note, is that the Early Warning and Response System (EWRS) will remain a separate platform. However, all EWRS users will also have access to EpiPulse to see certain events and threats when these events and threats have been posted both in EWRS and in EpiPulse. In EpiPulse, there should be a low threshold to report clusters/outbreaks. The differences between EpiPulse and EWRS are shown in the graph below:

	EpiPulse Events/EPIS	EWRS
Objective of the platform	Risk assessment	Risk management
Notification	Voluntary	Mandatory (Decision 1082/2013)
Type of notification	Informal	Formal
Participants	Epidemiologists/microbiologists (Human Public Health and Food Safety Authorities)	Policy makers (Human Public Health authorities)

Features of EpiPulse:

- Compared to EPIS, it is possible to launch multiple items in EpiPulse. In EPIS, it was only possible to launch one item (urgent inquiries), but in EpiPulse it is possible to launch signals, events, threats, news, forum, and long-term monitoring. ECDC can re-classify items if necessary.
- EpiPulse invites new users from different sectors (such as animal health, food safety and Vet-AMR) to create cross-sectional collaboration under the One Health approach.
- EpiPulse includes more disease groups than in TESSy, and it is possible to report unknown diseases.
- Nominated EpiPulse users will have access to the **Round Table reports and Communicable Disease Threat Reports (CDTRs)**. The daily round table reports will no longer be sent via email, and only nominated EpiPulse users will have access. This change is currently being finalised, and will be launched in the coming months.
 - ✓ EpiPulse users that will have access include: ECDC, Epidemic Intelligence contacts points, preparedness contact points, DG SANTE, WHO/Europe. As a general principle, generic/non-professional accounts will not be granted access to these reports.

Access to EpiPulse for Western Balkans and Turkey:

- The plan is that Western Balkans and Turkey should be granted access to EpiPulse with the same permissions as EU/EEA countries (provided that required data protection agreement is signed).
- ECDC will progressively open all domains to Western Balkans and Turkey, but as of now, users from Western Balkans have access to the following EpiPulse domains: epidemic intelligence, food- and waterborne diseases and zoonoses, influenza and other respiratory viruses (including COVID-19), preparedness, legionnaires' disease, and general surveillance.
- EPIS-ELDSNet and EPIS-FWD users from Turkey have not been migrated to EpiPulse, as the data protection agreement has not been signed; thus, no access to EpiPulse domains have been granted to representatives from Turkey.

Training in EpiPulse:

- There are in-build tutorials in the platform.
- Training modules are available on ECDC's virtual Academy (EVA). Can be accessed here: <https://eva.ecdc.europa.eu/>
- Webinars are being planned and will be launched soon.
- If needed, ECDC can organise a training session for Western Balkans and Turkey.

Integration of Western Balkans and Turkey as Observers into ECDC EVD NFP structure and networks

The Emerging and Vector-borne Disease Programme (EVD) has the objective of strengthening the EU's capacity for early detection, confirmation, and surveillance of EVDs, assess the effects of social and environmental determinants on infectious disease and strengthen preparedness and response for emerging and vector-borne diseases in the EU/EEA. The diseases covered by the programme include mosquito-borne diseases, tick-borne diseases, phlebotomine-borne diseases and other emerging diseases, vector- and rodent-borne diseases. A full list of diseases covered and specifications for which diseases are mandatory notifiable at the EU level can be found in the presentation.

Main activities of the EVD programme:

- Coordination of **networks** on EVDs for surveillance (diseases and vectors) and microbiology
- **Scientific advice**/support to EU/EEA countries and EC services
- Support ECDC risk assessments of EVDs and **response** capabilities
- **Surveillance** of EVDs informing about trends in epidemiology and indicating emerging threats
- Activities on **preparedness and communication** within ECDC

Networks under the EVD programme:

- EVD network of epidemiology, with focal points in public health institutes in EU/EEA MS
 - National Focal Points (NFPs) are the main contact points in the network. In addition, there are Operational Contact Points (OCP) which are contacted for specific issues.
 - NFPs are communicated with when a threat is reported. NFPs have access to EpiPulse where they report threats. NFPs are also invited to the Annual Network Meetings to share concerns.
- VectorNet, for entomology, with a focus on medical and veterinary entomologists (this network is outsourced and is in collaboration with EFSA)
 - The network provides maps of the distribution of vectors in Europe and beyond, updated every 6 months.
 - This is a very responsive network. Members are entomologists who have been nominated by their country (Western Balkans and Turkey also have members).
- EVD LabNet, with a focus on microbiology (Virology) – laboratories for diagnostic of viral EVD (this network is outsourced and funded by ECDC)
 - The network supports ECDC in early detection and surveillance of (re)emerging viral diseases in the EU/EEA, and for providing scientific advice. Western Balkans and Turkey is also in the scope of the network.
 - This is a very responsive network and supports EU Member States, EEA countries and Western Balkans and Turkey with identifying and assessing threats from communicable diseases, conduct

External Quality Assessments (EQA) on viral pathogens – usually twice per year, and provide short training courses to improve the diagnostic capability of EU expert laboratories.

Current interaction of Western Balkans and Turkey in the EVD programme:

- So far, National ECDC Correspondents from Western Balkans and Turkey have been invited to designate an expert to participate as an observer in the annual EVD Network meetings; the attendance was high and mutually beneficial
- Western Balkans and Turkey have access to TESSy to report West Nile virus infection cases
- National experts from Western Balkans and Turkey are part of VectorNet and in EVD-LabNet
- There has been ad-hoc participation in various projects

As of 2022, ECDC would like to propose establishing an Observer role for the ECDC National Focal Point (NFP) for Emerging and Vector-borne Diseases in Western Balkans and Turkey. The plan is to share the official nomination template and the Terms of References for Observer NFPs before the end of 2021.

Having an Observer NFP in Western Balkans and Turkey is thought to strengthen interactions and facilitate greater exchange of information between EU/EEA Member States and Western Balkans and Turkey. It is intended that the Observer NFP will be invited to the EVD Network Meeting, have access to EpiPulse, be able to participate in trainings, EQAs and network meetings organised by VectorNET and EVD-LabNet, and participate in discussions about the scope of the EVD programme.

Stakeholder Relationship Management (SRM) system - Managing contacts of Western Balkans² in SRM as of 2022

The Stakeholder Relationship Management (SRM) system is a database at ECDC with more than 5000 contacts and 1500 organisations. The database is designed to facilitate and improve communication between ECDC and its stakeholders. National Coordinators in the EU/EEA Member States can access the system and have control over their country's contacts and nominations.

As of 2022, all contacts from Western Balkans will be managed in SRM. It will be the responsibility of the National ECDC Correspondent in Western Balkans to access the SRM system and add/edit/delete country contacts, grant access to applications/permissions, ensuring that the country contact information is up to date. A training session for the National ECDC Correspondents will be organised in February 2022.

2.2.2 Work Stream 2 – Advancing One-Health approaches against AMR (antimicrobial resistance)

There are four objectives in this part of the ECDC-IPA6 project:

- Identify gaps and develop IPA beneficiary roadmaps on One-Health against AMR
 - o To do this, country visits to Western Balkan will be conducted. The role of Turkey in these country visits is planned as a partner in the country visit team, however, if requested by the national authorities, a country visit might be considered to Turkey, based on observations from these visits, individual country roadmaps on AMR will be developed. Roadmaps will also act as a follow-up tool on progress. The combined roadmaps should also serve as a guide for the Western Balkan region
- Support development of electronic surveillance of AMR
 - o To do this, technical meetings will be conducted with inputs from experts. A technical guidance will be developed on a standard AMR surveillance tool to facilitate data extraction, standardisation, analysis and reporting, which could be adapted and implemented by individual countries in Western Balkan and Turkey.
- Raise awareness, share experiences and learn from best practices through involvement of experts

² Turkey might benefit from this initiative depending on the level of their interest for cooperation and if the required legal data protection conditions are met.

- During country visits to the Western Balkans, needs for antibiotic awareness raising campaigns will be identified. The ECDC's European Antibiotic Awareness Day materials will be translated into local languages and disseminated based on country needs. Technical meetings on One-health against AMR will be organised between public health and animal health representatives and experts
- Secure political commitment for national interventions to enhance One-Health responses against AMR in Western Balkans
 - This will be done through organising conferences on One-Health at the governmental level

As the work with covid is starting to slow down, we are now able to start working on the One-Health project again. We are in the middle of the procurement procedure and aim to start working with the contractor in the beginning of 2022. We hope that country visits, gap analyses, roadmaps on AMR and workshops will begin taking place in 2022.

2.2.3 Work Stream 3 – Enhancing SARI surveillance to support the implementation of fit-for-purpose surveillance systems

The collection of **surveillance data** from Western Balkans and Turkey has not been ideal in 2020/21, presumably due to the SARS-CoV-2 pandemic. Prior to the pandemic, Western Balkans were reporting on West Nile Virus (WNV), Hepatitis A, Gonorrhoea, and Point prevalence survey (PPS) of healthcare-associated infections (HAIs) in acute care hospitals and long-term care facilities. Turkey was reporting on WNV. In 2020, no countries reported on Hepatitis A, only two countries reported on gonorrhoea (Kosovo and North Macedonia), and only four countries reported on WNV (Kosovo, Montenegro, North Macedonia, and Serbia). It is hoped that the previous reporting activity can be resumed.

With regards to the **case definitions** used for reporting in TESSy, ECDC would like to request that countries report on the case definition used. ECDC also asks that the latest case definition (EU 2018).

In terms of the **data format** used, ECDC asks that case-based reporting is used instead of aggregate reporting. Most countries are already reporting in a case-based format, but there has been some aggregated reporting on Hepatitis A and Gonorrhoea.

When it comes to the **proportion of lab-confirmed cases**, the situation is not bad, and most countries are able to confirm most diseases through laboratory confirmation. The exceptions are for WNV reporting in North Macedonia and Serbia, as well as for Hepatitis A reporting in Albania and Kosovo. ECDC finds it especially concerning that 0% of reported Hepatitis A cases in Albania and Kosovo are lab-confirmed, and ECDC would be interested in discussing the reasons behind this and assist where possible.

ECDC would also like to identify the reasons behind Bosnia and Herzegovina not reporting data. ECDC is happy to discuss with the country further and assist where possible.

E-SARI-NET (European SARI surveillance network) was set up in 2020, and as part of ECDC-IPA6 project all six beneficiaries in Western Balkans have joined. The network covers all respiratory diseases and is therefore an important tool for future pandemic preparedness. SARI surveillance has been operating well in Western Balkans, and ECDC would like to thank the countries for sharing data and experiences with others implementing the system for the first time now.

The next steps for SARI surveillance in Western Balkans are presented in the graph bellow.

	Participating sites	Sites reporting aggregated data	Sites reporting case-based data	Next steps
Albania	9	7	5 (2days/week)	Improving extraction of data from the new integrated electronic system to enable case-based reporting to TESSy (SARI and ILI); Ongoing VE studies on HCW, part of IMOVE-COVID.
Bosnia and Herzegovina	11	11	3	Implementing case-based data reporting to TESSy, vaccination data collection.
Kosovo	5	5	0	Improving case-based data collection using Redcap and implementing TESSy case-based data reporting; Adapting WHO protocol to implement VE studies (support by WHO for 12 months).
Montenegro	1	1	0	Expand to 3 sites, lab capacity SC2 and Flu, change to elect data collection.
North Macedonia	6	6	6 (first 5 lab-positive SARI/week)	Resume SARI data collection and reporting – case-based reporting from a subset of total SARI cases; Resuming ILI/ARI surveillance (19 sentinel sites).
Serbia	11	11	11 (Flu positive only)	Update data collection and reporting to TESSy, collect denominators

Going forward, ECDC aims at strengthening the E-SARI-Net network by expanding to more countries and producing regular outputs. It should also be noted that from April 2022 there will be a new contract supporting SARI surveillance under VEBIS (Vaccine Effectiveness, Burden and Impact Studies of COVID-19 and Influenza) framework.

2.3 Interactive discussion, feedback from countries and reflection on enhanced technical cooperation, future priorities, and needs

To spark the online discussions on the cooperation between ECDC and Western Balkans and Turkey, questions were asked to the audience using the polling platform Slido. The overview of the outcome from the Slido exercise suggests that:

- Covid-19, surveillance (incl. SARI, AMR, HAI), laboratory support (incl. HERA), and training are priority areas for ECDC to shape collaboration with IPA beneficiaries; One Health, reporting, threat detection, strengthening procedures and IT technology were also mentioned,
- The implementation of the ECDC strategy 2021-2027 is very relevant to all respondents,
- The majority of respondents were either very satisfied or satisfied with the progress of integration of national authorities into ECDC networks and systems,
- To intensify countries' routine data reporting to ECDC/TESSy, digitalisation and integration of surveillance systems would be needed along with training, continuous education, training-of-trainers, improvement of national legislation and mobilising additional public health workforce,
- It would be very useful for Western Balkans and Turkey if the data they report to ECDC/TESSy is presented in ECDC surveillance dashboards and other outputs along with the maps and surveillance reports of EU/EEA,
- National authorities would be ready to submit routine surveillance data as per ECDC reporting requirements to the following 5 priority diseases networks:
 - ❖ European food- and waterborne diseases and zoonoses network (FWD-Net) 85 %
 - ❖ European antimicrobial resistance surveillance network (EARS-Net) 69 %
 - ❖ European Legionnaire's disease surveillance network (ELDSNet) 54 %
 - ❖ Healthcare associated infections surveillance network (HAI-Net) 46 %
 - ❖ Emerging and vector-borne diseases network (EVD) 46 %
 - ❖ Measles, mumps and rubella network (MMR) 46 %

Feasibility to submit national surveillance data to other disease networks is as follows:

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- ❖ European hepatitis B and C surveillance network (Hepatitis) 38 %
 - ❖ European antimicrobial consumption network (ESAC-Net) 31 %
 - ❖ European network for STI surveillance (STI) 31 %
 - ❖ European diphtheria surveillance network (EDSN) 15 %
 - ❖ European antimicrobial resistance genes surveillance network (EURGEN-Net) 15 %
 - ❖ European invasive bacterial disease surveillance (IBD) 0%
- As regards to EpiPulse, countries' usage of the platform is rather limited because they either have no access, have never logged in or are only using it for reading purposes. It was clear that additional training on EpiPulse is need for all users of Western Balkans.

2.4 EC/ECDC assistance SARS-Cov-2 WGS under HERA Incubator

During the SARS-CoV-2 pandemic, it became extremely important to detect and keep track of new variants of SARS-CoV-2, as well as monitor their circulation. In 2021, the HERA Incubator was launched by the European Commission to rapidly support such needs during the pandemic.

Under the HERA Incubator, ECDC leads three projects from 2021-2023:

- Access to high-capacity, rapid turn-around time WGS services
 - o Immediate sequencing capacity has been provided to EU/EEA countries and Western Balkans (since August 2021) through access to a WGS service contract with an external contractor
 - o Services include shipping of RNA samples, cDNA synthesis, sequencing and basic bioinformatics with a turnaround time of a maximum of 7 working days, and guarantees the sequencing of up to 6,000 isolates per week
 - o Since Feb 2021, more than 79,000 samples have been sequenced from 11 EU/EEA countries and 2 countries in the Western Balkans (Kosovo and Montenegro). Additionally, Bosnia and Herzegovina and Albania have begun sending samples and North Macedonia and Serbia are in the process of doing so.
- National WGS and RT-PCR infrastructure projects
 - o Consisting of grants for improving WGS and RT-PCR infrastructures through a bottoms-up approach. The financing model is designed so that countries can define their specific needs and decide which actions are appropriate.
 - The reimbursement rate is 90% of the eligible costs, meaning each country needs to finance 10% of the included activities
 - Equipment purchases costs: Not normally eligible for reimbursement under such grants, but exceptionally fully reimbursable due the nature of the programme
 - o On 3 September 2021, ECDC allocated 77.1 M to 24 national projects
 - o Due to ECDC budget annuality, all project activities must be completed by 30 September 2022
- Cross-border capacity-building support programme
 - o Activities here include:
 - Laboratory support activities
 - Laboratory and bioinformatics training activities, including support to twinning
 - WGS and RT-PCR quality assurance and standardisation activities
 - RT-PCR assay development and validation
 - o Hope to have the programme running for the next three years, and expect to have a framework contract signed by the end of 2021, with the first SC to be launched in January 2022

2.5 MediPIET

MediPIET is a programme set up in 2013 by the European Commission to enhance health security in the Mediterranean and Black Sea region by supporting capacity building. Included in MediPIET is the Field Epidemiology Training Programme (FETP), Training of Trainers activities, the Annual Scientific Event and other networking activities. The programme will be implemented across three phases from 2013-2025, training a total of 5 cohorts.

MediPIET is currently in the third phase of implementation and the training of the 4th cohort has started. As of 2021, the programme has been run by ECDC and the programme is now also part of the EU Initiative on Health Security. Due to the pandemic, the training of the 4th cohort is fully virtual, and the cohort has recently finished their introductory course. We are hopeful to have in-person meetings again, but the next year is planned to be virtual.

What is new this year, is that MediPIET is run together with the 2021 cohort of EPIET and EUPHEM. This has very successful as it has provided the fellows with an opportunity to exchange information and strengthen their network.

With regards to Western Balkans and Turkey, 6 fellows are part of the 4th cohort (2 from Albania, 2 from Kosovo, 1 from North Macedonia and 1 from Serbia). Moreover, Bosnia and Herzegovina, Montenegro, and Turkey each have one nominated participant.

Future plans:

- In order to better maintain the networks created through the programme, ECDC plan to establish a MediPIET Alumni Network (MediAN). The network is still being set up, and updates on developments will be provided.
- There will be a specific MediPIET event at the ESCAIDE conference (16th November 2021, 12:00-13:00 CET), which will focus on the experiences of the countries having participated, contributions to public health systems and individual careers.
- The work plan for 2022 can be found below.

MediPIET – Work Plan 2022



ACTIVITY	MONTH
Selection of MediPIET Cohort 5	March-June
MediPIET Cohort 4: Organisation of M3 – Multivariable analysis (MVA)	March
MediPIET Cohort 4: Organisation of M1 part 2– Introductory course + Project Review Module part 1	April
MediPIET Cohort 4: Organisation of M4 – Risk Assessment and Mass Gatherings	May
Training Centres Forum meeting and regional workshop on MediPIET needs assessment	June
Trainings of Trainers/ECDC Summer Schools	Q2
MediPIET Cohort 4: Organisation of M5 – Project Review Module 1	Q3
MediPIET Cohort 5: Organisation of M1 Introductory Course including prep week	September/October
MediPIET Cohort 4: Organisation of M6 – Time Series Analysis and GIS	November
ESCAIDE MediPIET Scientific event (Stockholm)	November
MediPIET Cohort 5: Organisation of M2 – Outbreak Investigation	November/December
Training sites appraisals	TBD
Training sites visits	TBD

3. Conclusions and next steps

ECDC will follow-up with National ECDC Correspondents on:

- plan of activities and meetings under ECDC-IPA6 for 2022
- further prepare for the in-person training of trainers workshop on Legionnaires disease for accommodation managers planned in March 2022

- integration of countries as observers in NFP EVD and related operational contacts (including proposal to routinely report data on five-six EU notifiable EVD diseases to TESSy)
- integration of countries in SRM, including necessary training for National ECDC Correspondents
- training of those experts from Western Balkans who have access to EpiPulse domain on how to use the system
- further advance with procurement of services to support Western Balkans and Turkey in their advancement of One Health approaches against AMR together with EFSA
- further implement support activities to enhance SARI surveillance and integrate countries in E-SARI-Net

ECDC will reflect internally and then with countries on:

- how to support countries' reporting of mutually agreed diseases to TESSy and gradually expanding the list as per country needs and public health objectives;
- how to provide country-specific feedback on their surveillance data reporting and further configuration of ECDC web-based surveillance dashboards;
- possible trainings and other activities to support countries on functionalities, data reporting requirements and ECDC minimum standards, as relevant

Countries will indicate their prioritised options for diseases to be reported to TESSy with the aim to gradually report on all EU notifiable diseases by the end of 2027 as per EU acquis.

Countries will come back to ECDC with any further requests for additional priorities and activities to enhance cooperation with ECDC.

Virtual Meeting of National ECDC Correspondents from Western Balkans and Turkey

13 October 2021, WEBEX meeting

09:00 – 09:30 Webex connection, technical check	
Chair: Antonis LANARAS, Head of Section, European and International Cooperation Section	
09:30 – 09:45	Opening and welcome Andrea AMMON, ECDC Director
09:45 – 10:05	Strategic developments - Legislative proposals for a European Health Union: Strengthening the EU's health security framework and extending the mandate of ECDC and its international role - ECDC strategy 2021 – 2027 (20') Antonis LANARAS, Head of Section, European and International Cooperation Section, DIR
10:05 – 11:30	ECDC-IPA6 project: overview of implementation, key achievements and future plans Moderator: Agne BAJORINIENE, European and International Cooperation Section, DIR WS1 – Preparatory measures for participation in ECDC <ul style="list-style-type: none"> • State-of-play and future outlook (15'), Agne BAJORINIENE, European and International Cooperation Section, DIR • EpiPulse and engagement of Western Balkans and Turkey (20'), Jordi BORRELL PIQUE, Scientific Officer Epidemic Intelligence, PHF; Margot EINODER-MORENO, Expert Outbreak Response, DPR • Integration of WB and TR as Observers into ECDC EVD NFP structure and networks (10'), Ines REULET, Programme Manager Emerging and Vector-borne Diseases, DPR • Managing contacts of Western Balkans in SRM as of 2022 (10'), Skaidra KURAPKIENE, Corporate Governance Officer, DIR WS2 – Advancing One-Health approaches against AMR (10') , Aikaterini MOUGKOU, Expert Antimicrobial Resistance and Healthcare-Associated Infections WS3 – Enhancing SARI surveillance to support the implementation of fit-for-purpose surveillance systems (15') , Bruno CIANCIO, Head of Surveillance Section
11:30 – 12:15	Interactive discussion, feedback from countries and reflection on enhanced technical cooperation, future priorities and needs
12:15 – 13:00	Break
13:00 – 13:30	EC/ECDC assistance SARS-Cov-2 WGS under HERA Incubator (15') Daniel PALM, Principal Expert Microbiology/ Group Leader Microbiology and Molecular Surveillance, PHF Discussion (15')
13:30 – 13:50	MediPIET in Western Balkans and Turkey: state-of-play and the future (15+5') Adam ROTH, Head of Fellowship Programme, PHF
13:50 – 14:00	Conclusions and next steps